

Bob Holden
Governor



Jacquelyn D. White
Commissioner

State of Missouri
OFFICE OF ADMINISTRATION
Post Office Box 809
Jefferson City, Missouri 65102
(573) 751-2971
<http://www.oa.state.mo.us/acct/>

James A. Carder
Director
Division of Accounting

TO: State Agencies
FROM: OA/Accounting
DATE: June 16, 2003
SUBJECT: Purchasing Card Invoice Number Clarification

UMB Bank, our contractor for the state purchasing card program, is automating their payment posting procedures. In order for them to accurately post payments from the state agencies for payment of monthly statements, the invoice number field on the SAM II Financial payment document must be completed as specified in the cardholder manual.

The cardholder manual states "When a cardholder invoice is submitted for payment, the invoice number to be used on the payment document should begin with the two digit month and two digit calendar year of the billing statement. It should be followed by the last eight digits of the cardholder's account number". UMB Bank is receiving some payment data with three digits of information for the date or the date following the eight digit purchasing card number.

Attached is a sample statement showing the source of the invoice number. If you have any questions, please contact Teddie Velleri, 751-3289.

TV/oper/purchasingcardinvoicenumbering

Attachment

MONTHLY STATEMENT

Card Service Center
P.O. Box 419734
Kansas City, MO 64141

C915
004 V7C 0 12 0
59420002 4

	MINIMUM PAYMENT	PAST DUE AMOUNT	PAYMENT DUE DATE	NEW BALANCE	ACCOUNT NUMBER	PLEASE WRITE IN AMOUNT OF PAYMENT ENCLOSED
		0.00	06/10/03	0.00	4715 XXXX XXXX XXXX	\$

MAKE CHECK PAYABLE TO:

VISA
CARD CENTER
PO BOX 13262
KANSAS CITY MO 64199-3262

PLEASE CHECK BOX AND NOTE ADDRESS CHANGE

PLEASE DETACH AND ENCLOSE TOP PORTION WITH PAYMENT.



4715

00000000 00000000

Invoice # 0503XXXXXXXXX

VISA

ACCOUNT NUMBER	CREDIT LIMIT	STATEMENT CLOSING DATE	PAYMENT DUE DATE	MINIMUM PAYMENT
4715 XXXX XXXX XXXX	1500	05/16/03	06/10/03	\$

DATE OF		REFERENCE NUMBER	PURCHASES, CASH ADVANCES, PAYMENTS, CREDITS AND ADJUSTMENTS SINCE LAST STATEMENT	AMOUNT
TRANS	POST			
0502	0504	24308033WENFHX766	SCHRIEFERS OFFICE EQUI JEFFERSON CTYMO MCC: 5999 MERCHANT ZIP: 65109 SALES TAX: \$ 0.00 TAX INCLUDED: 0 CUSTOMER CODE: 000000000000000000	14.28
0514	0515	243080347ENFHX754	SCHRIEFERS OFFICE EQUI JEFFERSON CTYMO MCC: 5999 MERCHANT ZIP: 65109 SALES TAX: \$ 0.00 TAX INCLUDED: 0 CUSTOMER CODE: 000000000000000000	0.75
0515	0516	243080348ENFHX75J	SCHRIEFERS OFFICE EQUI JEFFERSON CTYMO MCC: 5999 MERCHANT ZIP: 65109 SALES TAX: \$ 0.00 TAX INCLUDED: 0 CUSTOMER CODE: 000000000000000000 TOTAL PURCHASES \$29.31 TOTAL \$29.31	14.28

PREVIOUS BALANCE	PAYMENTS	CREDITS	PURCHASES/DEBITS	CASH ADVANCES	FINANCE CHARGE	NEW BALANCE
\$ 0.00	0.00	0.00	0.00	0.00	0.00	\$ 0.00

AN AMOUNT FOLLOWED BY A MINUS SIGN (-) IS A CREDIT OR A CREDIT BALANCE UNLESS OTHERWISE INDICATED

FINANCE CHARGE INFORMATION	PURCHASES/DEBITS		CASH ADVANCES	ANNUAL PERCENTAGE RATE
	PREVIOUS BILLING PERIOD	CURRENT BILLING PERIOD	CURRENT BILLING	
AVERAGE DAILY BALANCE	0.00	0.00	0.00	0.00
MONTHLY PERIODIC RATE	0.00	0.00	0.00	
CORRESPONDING ANNUAL PERCENTAGE RATE	0.00	0.00	0.00	
FINANCE CHARGE COMPUTATION	0.00	0.00	0.00	

Payment Address:
Card Center
P.O. Box 219736
Kansas City, MO 64121-9736

Inquiry Address:
Card Center
P.O. Box 419734
Kansas City, MO 64141

IMPORTANT: CERTAIN ADDITIONAL FINANCE CHARGES MAY BE AVOIDED OR REDUCED IF YOU PAY THE "NEW BALANCE" WITHIN 25 DAYS OF THE ABOVE "STATEMENT CLOSING DATE" (SUCH 25TH DAY WILL NOT ALWAYS BE THE STATED "PAYMENT DUE DATE"). SEE REVERSE SIDE FOR INSTRUCTIONS ON THIS REMITTANCE AND RETURN FROM INVOICE. THESE DEBITORS ARE NOT TO BE USED FOR ANY OTHER PURPOSES.